

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

ORRINPAC

ADDRESS (number and street)

175 S. WEST TEMPLE, SUITE 650

☐Check if different  
than previously  
reported. (ACC)

SALT LAKE CITY

UT

84101

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00235572

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☒Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

11

01

2007

through

11

30

2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

STANLEY R. DE WAAL

Signature of Treasurer

Electronically Filed by STANLEY R. DE WAAL

Date

12

18

2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
ORRINPAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
1	1	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
1	1	3	0	2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>Y Y Y Y</span> <span>2007</span>		70096.10
(b) Cash on Hand at Beginning of Reporting Period .....	104885.18	
(c) Total Receipts (from Line 19) .....	67635.33	354717.33
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	172520.51	424813.43
7. Total Disbursements (from Line 31) .....	17617.16	269910.08
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	154903.35	154903.35
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

ORRINPAC

Report Covering the Period:

From:

M M  
1 1D D  
0 1Y Y Y Y  
2 0 0 7

To:

M M  
1 1D D  
3 0Y Y Y Y  
2 0 0 7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	26350.00	194700.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	100.00	200.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	26450.00	194900.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	40747.00	158747.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➡	67197.00	353647.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	438.33	1070.33
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	67635.33	354717.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	67635.33	354717.33

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00
(i) Federal Share.....		
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	17617.16	78910.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	17617.16	78910.08
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	179000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	12000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	17617.16	269910.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	17617.16	269910.08

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	67197.00	353647.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	67197.00	353647.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	17617.16	78910.08
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	17617.16	78910.08

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 21

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

ORRINPAC

Full Name (Last, First, Middle Initial)  
**A. ABBOTT LABORATORIES EMPL. PAC**

Mailing Address 100 ABBOT PARK RD

City State Zip Code  
**NORTH CHICAGO IL 60064-6028**

FEC ID number of contributing  
federal political committee. **C C00040279**

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
**1 1 / 2 7 / 2 0 0 7**

Transaction ID: 71203.C1830

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)  
**B. ADVANTA CORP. EMPLOYEES PIF**

Mailing Address P. O. BOX 15555

City State Zip Code  
**CLAYMONT DE 19703**

FEC ID number of contributing  
federal political committee. **C C00279604**

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
**1 1 / 0 6 / 2 0 0 7**

Transaction ID: 71109.C1807

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)  
**C. ALLERGAN INC. PAC FOR EMPLOYEES**

Mailing Address 2148 E. ORANGE VIEW LN

City State Zip Code  
**ORANGE CA 92867**

FEC ID number of contributing  
federal political committee. **C C00292102**

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
**1 1 / 0 6 / 2 0 0 7**

Transaction ID: 71109.C1805

Amount of Each Receipt this Period

2000.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

4000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 21

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

Full Name (Last, First, Middle Initial)

A. AMGEN PAC

Mailing Address ONE AMGEN CENTER DR

City State Zip Code  
 NEWBURY PARK CA 91320-1789

FEC ID number of contributing federal political committee.

C C00251876

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 1 4 / 2 0 0 7

Transaction ID: 71203.C1815

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

B. BARBOUR GRIFFITH &amp; ROGERS PAC

Mailing Address 1275 PENNSYLVANIA AVE, NW

City State Zip Code  
 WASHINGTON DC 20004

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2247.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 1 4 / 2 0 0 7

Transaction ID: 71210.C1857

Amount of Each Receipt this Period

2247.00

In-Kind

Note: Reception Sponsorship

Full Name (Last, First, Middle Initial)

C. CLEAR CHANNEL COMMUNICATIONS PAC

Mailing Address 200 E. BASSE RD

City State Zip Code  
 SAN ANTONIO TX 78209-8328

FEC ID number of contributing federal political committee.

C C00279216

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 0 6 / 2 0 0 7

Transaction ID: 71109.C1803

Amount of Each Receipt this Period

1500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶

8747.00

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 21

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

Full Name (Last, First, Middle Initial)

**A.** COMCAST CORPORATION PAC

Mailing Address 1500 MARKET ST  
33RD FLR EAST TOWER

City State Zip Code  
PHILADELPHIA PA 19102

FEC ID number of contributing  
federal political committee.

**C** C00248716

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 7

Transaction ID: 71109.C1808

Amount of Each Receipt this Period

1000.00

Receipt

Full Name (Last, First, Middle Initial)

**B.** COOPERATIVE OF AMERICAN PHYSICIANS

Mailing Address 333 S. HOPE ST, 8TH FLR

City State Zip Code  
LOS ANGELES CA 90071

FEC ID number of contributing  
federal political committee.

**C** C00161604

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 7

Transaction ID: 71203.C1835

Amount of Each Receipt this Period

2000.00

Receipt

Full Name (Last, First, Middle Initial)

**C.** DAVITA INC. PAC - DaPAC

Mailing Address 21250 HAWTHORNE BLVD, STE 800

City State Zip Code  
TORRANCE CA 90503

FEC ID number of contributing  
federal political committee.

**C** C00340943

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: 71203.C1838

Amount of Each Receipt this Period

1500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 21

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

ORRINPAC

<b>A.</b> Full Name (Last, First, Middle Initial) FRAGOMEN PAC Mailing Address 1212 NEW YORK AVE, NW, STE 850 City State Zip Code WASHINGTON DC 20005 FEC ID number of contributing federal political committee. <b>C</b> C00418095 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7 <b>Transaction ID:</b> 71109.C1813 Amount of Each Receipt this Period 1000.00 Receipt
<b>B.</b> Full Name (Last, First, Middle Initial) GEN-PROBE PAC Mailing Address 10210 GENETIC CENTER DR City State Zip Code SAN DIEGO CA 92121 FEC ID number of contributing federal political committee. <b>C</b> C00405100 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 9 / 2 0 0 7 <b>Transaction ID:</b> 71203.C1822 Amount of Each Receipt this Period 1000.00 Receipt
<b>C.</b> Full Name (Last, First, Middle Initial) KINETIC CONCEPTS, INC. PAC Mailing Address 8023 VANTAGE DR, STE 650 City State Zip Code SAN ANTONIO TX 78230 FEC ID number of contributing federal political committee. <b>C</b> C00235176 Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 6 / 2 0 0 7 <b>Transaction ID:</b> 71109.C1802 Amount of Each Receipt this Period 1000.00 Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 21

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

**A. NATIONAL VENTURE CAPITAL ASSOCIATION**

Mailing Address 1655 NORTH FORT MYER DR, STE.850

City State Zip Code  
ARLINGTON VA 22209

FEC ID number of contributing federal political committee. **C** C00150367

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 9 / 2 0 0 7

Transaction ID: 71203.C1826

Amount of Each Receipt this Period

5000.00

Receipt

**B. PHARMAVITE PAC**

Mailing Address 8510 BALBOA BLVD.

City State Zip Code  
NORTHRIDGE CA 91325

FEC ID number of contributing federal political committee. **C** C00410654

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 7

Transaction ID: 71203.C1829

Amount of Each Receipt this Period

1000.00

Receipt

**C. PHYSICIAN HOSPITALS OF AMERICA PAC**

Mailing Address 600 S CLIFF AVE, STE 106

City State Zip Code  
SIOUX FALLS SD 57104

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 7

Transaction ID: 71203.C1834

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 21

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

ORRINPAC

**A. PRICEWATERHOUSE COOPERS PAC**

Full Name (Last, First, Middle Initial)

Mailing Address 1301 K ST, NW, STE 800 WEST

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing federal political committee.

**C** C00107235

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	7

Transaction ID: 71203.C1836

Amount of Each Receipt this Period

5000.00

Receipt

**B. RECORDING INDUSTRY ASSN OF AMERICA**

Full Name (Last, First, Middle Initial)

Mailing Address 1330 CONNECTICUT AVE, NW, STE 300

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee.

**C** C00009357

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	0	6	/	2	0	0	7

Transaction ID: 71109.C1804

Amount of Each Receipt this Period

1000.00

Receipt

**C. REITPAC REAL ESTATES INVESTMENTS TRUST**

Full Name (Last, First, Middle Initial)

Mailing Address 1875 I STREET, N.W., STE 600

City	State	Zip Code
WASHINGTON	DC	20006-5413

FEC ID number of contributing federal political committee.

**C** C00303339

Name of Employer

Occupation

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	7

Transaction ID: 71203.C1820

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

11000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 21

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

**A.** Full Name (Last, First, Middle Initial)  
UNION PACIFIC CORP FUND EFFECT GOVT

Mailing Address 600 THIRTEENTH ST, NW, STE 340

City State Zip Code  
 WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee. **C** C00010470

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 2 7 / 2 0 0 7

Transaction ID: 71203.C1831

Amount of Each Receipt this Period

1500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
UNITEDHEALTH GROUP, INC. PAC

Mailing Address 9900 BREN ROAD EAST

City State Zip Code  
 HOPKINS MN 55343

FEC ID number of contributing  
federal political committee. **C** C00274431

Name of Employer Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 1 9 / 2 0 0 7

Transaction ID: 71203.C1825

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

40747.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

**A.** Full Name (Last, First, Middle Initial)  
DANA K. ANDERSON

Mailing Address 401 WILSHIRE BLVD, STE. 700

City State Zip Code  
 SANTA MONICA CA 90401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MACERICH

Occupation  
VICE CHAIRMAN OF THE BOARD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 1 9 / 2 0 0 7

Transaction ID: 71203.C1816

Amount of Each Receipt this Period

5000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
WILLIAM P. BARR

Mailing Address 1200 DALEVIEW DR.

City State Zip Code  
 MCLEAN VA 22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Collier, Rill, Shannon &  
Scott

Occupation  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 1 9 / 2 0 0 7

Transaction ID: 71203.C1823

Amount of Each Receipt this Period

1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
WILLIAM T. COLEMAN, JR.

Mailing Address 1625 EYE ST, NW

City State Zip Code  
 WASHINGTON DC 20006-4001

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
OMELVENY & MYERS LLP

Occupation  
SNR PARTNER & SNR COUNSELOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 1 / 1 9 / 2 0 0 7

Transaction ID: 71203.C1824

Amount of Each Receipt this Period

500.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 21

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

ORRINPAC

Full Name (Last, First, Middle Initial)

**A.** ARTHUR M. COPPOLA

Mailing Address P. O. BOX 2172

City	State	Zip Code
SANTA MONICA	CA	90407

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
MACERICHOccupation  
PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	7

Transaction ID: 71203.C1817

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

**B.** VAHID DELRAHIM

Mailing Address 4242 VICASA DRIVE

City	State	Zip Code
CALABASAS	CA	91302

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
SELF EMPLOYEDOccupation  
CAR WASH OWNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	7	/	2	0	0	7

Transaction ID: 71203.C1832

Amount of Each Receipt this Period

5000.00

Receipt

Full Name (Last, First, Middle Initial)

**C.** JAMES F. FLAHERTY III

Mailing Address 211 S. BRISTOL AVE

City	State	Zip Code
LOS ANGELES	CA	90049

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
HEALTH CARE PROPERTY INC.Occupation  
EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	9	/	2	0	0	7

Transaction ID: 71203.C1821

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional) .....

10500.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

**A.** Full Name (Last, First, Middle Initial)  
 MARC I. KORN  
 Mailing Address 187 ROXBURY PK

City State Zip Code  
 EAST AMHERST NY 14051

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Healthcare Alliance Inc.

Occupation  
 Consultant & Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 0 6 / 2 0 0 7

Transaction ID: 71109.C1810

Amount of Each Receipt this Period

1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
 EDWIN A. LEVY  
 Mailing Address 360 EAST 72ND ST

City State Zip Code  
 NEW YORK NY 10021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 LEVY, HARKINS & CO. INC.

Occupation  
 EXECUTIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 0 6 / 2 0 0 7

Transaction ID: 71109.C1806

Amount of Each Receipt this Period

350.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
 DANIEL JAMES MATTOON  
 Mailing Address 6344 CAVALIER CORRIDOR

City State Zip Code  
 FALLS CHURCH VA 22044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 MATTOON & ASSOCIATES

Occupation  
 LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 1 1 / 0 6 / 2 0 0 7

Transaction ID: 71109.C1812

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

2350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 21

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

**A.** Full Name (Last, First, Middle Initial)  
FRANCIS G. RUSHFORD  
Mailing Address 3509 LEVEE DRIVE

City State Zip Code  
CARLSBAD CA 92010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYED

Occupation  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 7

Transaction ID: 71203.C1833

Amount of Each Receipt this Period

1000.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
MACE SIEGEL

Mailing Address P. O. BOX 2172

City State Zip Code  
SANTA MONICA CA 90407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MACERICH

Occupation  
CHAIRMAN OF THE BOARD

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 7

Transaction ID: 71203.C1818

Amount of Each Receipt this Period

5000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
EDWARD WHITE

Mailing Address 21700 OXNARD ST, STE 400

City State Zip Code  
WOODLAND HILLS CA 91367-2805

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 7

Transaction ID: 71203.C1819

Amount of Each Receipt this Period

1000.00

Receipt

**SUBTOTAL** of Receipts This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

26350.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 21

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

**A.**

Full Name (Last, First, Middle Initial)

ZIONS BANK

Mailing Address 310 SOUTH MAIN STREET

City

SALT LAKE CITY

State

UT

Zip Code

84101-

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1070.33

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 3 0 / 2 0 0 7

Transaction ID: 71210.C1858

Amount of Each Receipt this Period

438.33

Interest Received

**SUBTOTAL** of Receipts This Page (optional) .....

438.33

**TOTAL** This Period (last page this line number only) .....

438.33

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 21

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
 ORRINPAC

Full Name (Last, First, Middle Initial)

## **A. BARBOUR GRIFFITH & ROGERS PAC**

Mailing Address 1275 PENNSYLVANIA AVE, NW

City WASHINGTON State DC Zip Code 20004-

Purpose of Disbursement  
 NOTE: RECEPTION SPONSORSHIP

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 71210.C1857IK

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2247.00

IN KIND: NOTE: RECEPTION  
 SPONSORSHIP

Full Name (Last, First, Middle Initial)

## **B. CBIZ FPG, LLC**

Mailing Address 175 SOUTH WEST TEMPLE, SUITE 650

City SALT LAKE CITY State UT Zip Code 84101-

Purpose of Disbursement  
 ACCOUNTING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 71203.E1699

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1184.47

ACCOUNTING FEES

Full Name (Last, First, Middle Initial)

## **C. CBIZ FPG, LLC**

Mailing Address 175 SOUTH WEST TEMPLE, SUITE 650

City SALT LAKE CITY State UT Zip Code 84101-

Purpose of Disbursement  
 ACCOUNTING FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 71203.E1700

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2010.30

ACCOUNTING FEES

**SUBTOTAL** of Disbursements This Page (optional) .....

5441.77

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
 ORRINPAC

Full Name (Last, First, Middle Initial)

## **A. NATIONAL POLITICAL ASSOCIATES**

Mailing Address P.O. BOX 2204

City WASHINGTON State DC Zip Code 20013-

Purpose of Disbursement  
 PAC CONSULTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 71203.E1701

Date of Disbursement

11 / 20 / 2007

Amount of Each Disbursement this Period

8000.00

PAC CONSULTING

Full Name (Last, First, Middle Initial)

## **B. North Capitol Street Enterprises**

Mailing Address 400 North Capitol Street, NW  
 Suite 585

City WASHINGTON State DC Zip Code 20001-

Purpose of Disbursement  
 OFFICE RENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 71203.E1702

Date of Disbursement

11 / 01 / 2007

Amount of Each Disbursement this Period

767.63

OFFICE RENT

Full Name (Last, First, Middle Initial)

## **C. North Capitol Street Enterprises**

Mailing Address 400 North Capitol Street, NW  
 Suite 585

City WASHINGTON State DC Zip Code 20001-

Purpose of Disbursement  
 OFFICE RENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 71203.E1703

Date of Disbursement

11 / 30 / 2007

Amount of Each Disbursement this Period

812.36

OFFICE RENT

**SUBTOTAL** of Disbursements This Page (optional) .....

9579.99

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 21

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)  
 ORRINPAC

Full Name (Last, First, Middle Initial)

## **A. THE MONOCLE**

Mailing Address 107 D STREET, N.W.

City  
 WASHINGTON

State  
 DC

Zip Code  
 20002-

Purpose of Disbursement  
 PAC LUNCHEON

Candidate Name

Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 71203.E1704

Date of Disbursement

/   /

Amount of Each Disbursement this Period

530.00

PAC LUNCHEON

Full Name (Last, First, Middle Initial)

## **B. ZIONS BANK**

Mailing Address 310 SOUTH MAIN STREET

City  
 SALT LAKE CITY

State  
 UT

Zip Code  
 84101-

Purpose of Disbursement  
 CREDIT CARD SEE BELOW 5090

Candidate Name

Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 71203.E1705

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1945.35

CREDIT CARD SEE BELOW 5090

Full Name (Last, First, Middle Initial)

## **C. CHARLIE PALMER STEAKHOUSE**

Mailing Address 101 CONSTITUTION AVE. NW

City  
 WASHINGTON

State  
 DC

Zip Code  
 20001-

Purpose of Disbursement  
 CATERING FOR PAC DINNER

Candidate Name

Category/  
 Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: 71203.E1706

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1945.35

**[MEMO ITEM]**

MEMO: CATERING FOR PAC DI-  
 NNER

**SUBTOTAL** of Disbursements This Page (optional) .....

2475.35

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 21

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
ORRINPAC

A. Full Name (Last, First, Middle Initial)  
ZIONS BANK

Mailing Address 310 SOUTH MAIN STREET

City SALT LAKE CITY State UT Zip Code 84101-

Purpose of Disbursement  
SERVICE FEES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: 71210.E1707

Date of Disbursement

/   /

Amount of Each Disbursement this Period

120.05

SERVICE FEES

SUBTOTAL of Disbursements This Page (optional) .....

120.05

TOTAL This Period (last page this line number only) .....

17617.16